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N.J. BOARD OF DENTISTRY
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STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF DENTISTRY

IN THE MATTER OF

MARIANNE MAURO, D.M.D.
License No. DI 17117

Administrative Action

CONSENT ORDER OF REINSTATEMENT

LICENSED TO PRACTICE DENTISTRY
IN THE STATE OF NEW JERSEY

This matter was opened to the New Jersey State Board of Dentistry ("Board") upon the application of Marianne Mauro, DM.D. ("respondent"), seeking to reinstate her license to practice dentistry. Respondent's license was suspended pursuant to an Order of Automatic Suspension of Licensure which was filed with the Board on September 2, 2004. The Order of Automatic Suspension of Licensure was entered due to respondent's failure to comply with multiple provisions of the May 19, 2004 Order of Reinstatement. Specifically, respondent failed to submit to urine monitoring on at least two occasions; failed to cooperate with her treating psychologist to establish a weekly urine monitoring regime; was consistently late for weekly counseling sessions with her treating psychologist; failed to engage in continuous psychiatric treatment and failed to attend group therapy for professionals with chemical addictions.

Pursuant to the May 19, 2004 Order of Reinstatement, respondent was afforded the right to apply for removal of the automatic suspension. A hearing was held before the Board on September 22, 2004. At the conclusion of the hearing, the Board determined that respondent failed to comply with the terms of the May 19, 2004 Order of Reinstatement and voted to suspend respondent's license for one year.

Prior to returning to practice, respondent was required to appear before the Board and demonstrate that she is physically and psychologically fit and that she is capable of discharging the functions of a licensee in a manner consistent with the public's health, safety and welfare. She was

also required to demonstrate that she is not suffering from any impairment or limitation resulting from the use of any CDS or other substance, whether legal or illegal, which could affect her practice. Respondent was further required to provide the Board with reports from each and every mental health professional who has participated in her care and/or treatment. Additionally, respondent was required to provide the Board with a report from her primary care physician detailing her medical fitness and compliance with urine monitoring, including results of all urine tests. Respondent was also required to affirmatively establish her fitness, competence and capacity to re-enter the active practice of dentistry within New Jersey, including an accounting of all continuing education courses completed while her license was surrendered.

In connection with respondent's application for reinstatement, the Board reviewed a report from George F. Wilson, M.D., a psychiatrist for the Dual Diagnosis Intensive Outpatient Program of Princeton House. Dr. Wilson saw respondent on a weekly basis during the twelve week period that respondent attended Princeton House during 2005. Dr. Wilson concluded that respondent's previous diagnosis of bi-polar disorder was not warranted and he diagnosed respondent's condition as Attention Deficit Hyperactivity Disorder. Dr. Wilson changed respondent's medication and states that there was a noticeable improvement in respondent's concentration and emotional functioning within the group sessions and in respondent's overall stability. Dr. Wilson states that he has seen respondent on a monthly basis since she successfully completed the Intensive Outpatient Program. Respondent has continued to show improved emotional, mental, and interpersonal functioning and she appears to have few of the symptoms of Attention Deficit Hyperactivity Disorder. Dr. Wilson concludes that respondent's progress qualifies her for reinstatement and supervised return to practice.

The Board also considered submitted information with regard to respondent's rehabilitative efforts. The Board reviewed reports from the Princeton House Outpatient Program with regard to respondent's attendance and progress in the outpatient treatment program in 2005. Additionally, respondent was subjected to twice weekly urine drug screens as part of her twelve week program. The urine monitoring reports were consistently negative. The Board also considered respondent's attendance in AA/NA meetings a minimum of three times per week which continue currently.

Having considered the testimony of respondent and the reports provided, the Board has determined that respondent may have her license reinstated subject to the conditions outlined in this order. Respondent appears to be doing well in recovery at this time. However, the Board is keenly aware of respondent's history of relapse and therefore any deviation from the terms of this order will result in immediate suspension of license. The Board finds that such a provision coupled with the restrictions placed on respondent's practice by this order are adequate to protect the health, safety and welfare of the public, and that good cause exists for entry of this order.

IT IS THEREFORE ON THIS 1st DAY OF February, 2006
HEREBY ORDERED AND AGREED THAT:

1. Respondent's license to practice dentistry in the State of New Jersey is hereby reinstated subject to the restrictions in this order.
2. Respondent shall abstain from any and all intoxicating substances, including but not limited to alcohol as well as any controlled dangerous substances except pursuant to a bona fide prescription written by a physician or dentist for good medical or dental cause in her own treatment. In addition, respondent shall advise any and all treating physicians and/or dentists of her history of substance abuse. Respondent shall cause any physician or dentist who prescribes medication which is a controlled dangerous substance to provide a written report to the Board together with patient records indicating the need for such medication. Such report shall be provided to the Board no later than two (2) days subsequent to the prescription in order to avoid confusion which may be caused by a confirmed positive urine test as a result of such medication.
3. Respondent shall enroll in the Professional Assistance Program (PAP) and follow all their recommendations for treatment and counseling, including but not limited to, attending support groups, including NA or AA as directed by the PAP, and shall submit to urine monitoring to be coordinated with PAP subject to the conditions for urine monitoring set forth in paragraph 4 below. Respondent shall provide evidence of attendance at NA/AA groups directly to the PAP and to the Board on a quarterly basis. For purposes of this order, the first quarter commences on January 1, 2006. The first submission shall be due not later than March 31, 2006 for all NA/AA attendance for the months of January, February and March starting on the entry date of this order. If respondent discontinues participation with the PAP or attendance at any support group, without first obtaining approval of the Board and the PAP, she shall be deemed in violation of this Order.
4. (a) Respondent shall submit to random urine screens a minimum of once per week. The urine screen monitoring program, as well as the laboratory facility conducting the urine testing, must be approved by the Board. The Board shall provide respondent and the PAP with specific directions for the protocol of the testing procedure. All urine screens must be directly observed and respondent shall comply with all additional urine screen procedures and protocols outlined and prescribed by the Board. The urine screen requirement shall continue until further order of the Board expressly reducing or discontinuing testing. The initial drug screen shall utilize appropriate screening techniques and all confirming tests and/or secondary tests shall be performed by gas/chromatography/mass spectrometry (G.C./M.S). The testing procedure shall include a forensic chain of custody protocol to ensure sample integrity and to provide documentation in the event of

a legal challenge. The Board may, in its sole discretion, modify the frequency of testing or method of testing during the monitoring period.

(b) All test results shall be provided to Kevin B. Earle, Executive Director of the Board, or his designee in the event he is unavailable. The Board retains sole discretion to modify the manner and the extent of testing in the event technical developments or individual requirements indicate that a different methodology or approach is required in order to guarantee the accuracy and reliability of the testing.

(c) Any failure by respondent to submit or provide a urine screen within twenty-four (24) hours of a request will be deemed to be equivalent to a confirmed positive urine test. In the event respondent is unable to appear for a scheduled urine test or provide a urine sample due to illness or other impossibility, consent to waive that day's test must be secured from Kevin B. Earle, or his designee. Personnel at the lab facility shall not be authorized to waive a urine test. In addition, respondent must provide the Board with written substantiation of her inability to appear for a test within two (2) days, e.g., a physician's report attesting that respondent was so ill that she was unable to provide the urine sample or appear for the test. "Impossibility" as employed in this provision shall mean an obstacle beyond the control of respondent that is so insurmountable or that makes appearance for the test or provision of the urine sample so infeasible that a reasonable person would not withhold consent to waive the test on that day.

(d) In the event respondent will be out of the State for any reason, the Board shall be so advised so that arrangements may be made at the Board's discretion for alternate testing.

(e) Any urine test result showing creatinine levels below 20 mg/dL and a specific gravity below 1.003 shall be deemed dilute and a presumption of a confirmed positive urine test shall arise requiring a confirming test by hair analysis or other appropriate means.

(f) Respondent shall familiarize herself with all foods, food additives or other products (such as poppy seeds) which may affect the validity of urine screens, be presumed to possess that knowledge, and shall refrain from the use of such substances. Ingestion of such substances shall not be an acceptable reason for a positive urine screen and/or failure to comply with the urine monitoring program.

5. Respondent shall continue in treatment with Dr. George F. Wilson or with another Board approved psychiatrist, until further order of the Board. Respondent shall continue in treatment for Attention Deficit Hyperactivity Disorder, as well as for her addiction, with Dr. Wilson, or other Board approved psychiatrist, at all times, and shall remain compliant with her medication regimen as prescribed by her approved physicians for treatment. Respondent shall notify the Board ten (10) days prior to engaging in therapy with a new psychiatrist. Respondent shall be responsible for ensuring that any treating psychiatrist provides the PAP and the Board with quarterly reports

regarding her progress and compliance with treatment and with her medication regimen. For purposes of this order, the first quarter commences on January 1, 2006. The first submission shall be due no later than March 31, 2006 for all treatment undertaken in January, February and March starting on the entry date of this order. Dr. Wilson, or his successor, shall agree to be responsible to immediately report to the PAP and to the Board, orally and in writing and within twenty-four (24) hours, any discontinuance of treatment and any evidence or behavior indicating that respondent is under the influence or engaging in the use of psychoactive substances. Respondent shall also provide the Board with a copy of this order signed by Dr. Wilson, or other Board approved psychiatrist, signifying his or her agreement to make such reports to the Board.

6. Respondent is prohibited from owning her own dental practice or otherwise engage in solo practice until further order of the Board. The Board believes that the stress associated with owning a dental practice as a sole proprietor could impede respondent's recovery. Instead, Respondent shall work with a Board approved New Jersey licensed dentist. The Board approved licensee shall act as a monitor and shall provide the Board with quarterly reports regarding respondent's progress and behavior. The Board approved monitor, shall be made fully aware of respondent's medical condition and status with the Board. The Board approved monitor, shall agree to be responsible for immediately reporting to the PAP and to the Board orally and in writing within twenty-four (24) hours any evidence or behavior indicating that respondent is under the influence or engaging in the use of psychoactive substances. Respondent shall provide such Board approved monitor, with a copy of this order. Respondent shall also provide the Board with a copy of this order signed by the Board approved monitor, signifying his or her agreement to make such reports to the Board. At no time shall respondent practice dentistry without a Board approved monitor until further order of the Board.

7. Respondent's hours of clinical practice shall not exceed twenty-eight (28) clinical hours of practice per week. At no time shall respondent practice in excess of twenty-eight hours of clinical practice per week until further order of the Board.

8. Respondent shall only be permitted to prescribe controlled dangerous substances for patients as required in connection with dental treatment or administer medication to patients in the course of dental treatment, in accordance with the following terms and conditions:

(a) Respondent shall use sequentially numbered, triplicate prescription pads for all prescriptions written.

(b) Respondent shall provide the original prescription to the patient, attach one copy of the prescription to the patient record, and submit the third copy to the Board, attention Kevin B. Earle, Executive Director, on a quarterly basis. For purposes of this order, the first quarter commences on January 1, 2006. However, the first submission shall be due no later than March

31, 2006, for all prescriptions written in January, February and March starting on the entry date of this Order.

(c) Respondent shall be required to account for each consecutively numbered prescription, regardless of whether the particular prescription was voided or not used for any purpose whatsoever.

9. Respondent shall provide any and all releases to any and all parties who are participating in the monitoring, treatment or other program as outlined in this order, as may be required, in order that all reports, records, and other pertinent information may be provided to the Board and the PAP in a timely manner. Via her signature on this order, respondent agrees that the Board may utilize any information received in connection with any proceeding regarding licensure.

10. Respondent shall personally provide the Board with quarterly reports concerning her status in practice, as well as the status of her medical condition. For purposes of this order, the first quarter commences on January 1, 2006. However, the first submitted report from respondent shall be due no later than March 31, 2006 for issues related to the status of her practice and her medical condition for the months of January, February and March starting on the entry date of this order.

11. Respondent may seek modification of the terms of this order not sooner than one (1) year from its entry. Prior to any modification or removal of restrictions set forth in this order, respondent shall:

(a) Appear before the Board or a committee of the Board to discuss her recovery and to demonstrate to the satisfaction of the Board that she is not then suffering from any impairment or limitation resulting from any psychiatric condition or the use of any substance, whether legal or illegal, which could affect her practice;

(b) Prior to her appearance, respondent shall provide the Board with reports from each and every mental health professional (including but not limited to: psychologists, counselors, therapists, psychiatrists) who have participated in respondent's care and/or treatment during the period of time from her entry into treatment to her appearance and the Board may require receipt of a report of an independent psychiatric evaluation with a Board approved psychiatrist.

12. Respondent hereby consents to the entry of an Order of automatic suspension of license without notice, upon the Board's receipt of any information which the Board in its sole discretion deems reliable demonstrating that respondent is not capable of carrying out the functions of a licensee consistent with the public health, safety or welfare or that respondent has failed to comply with any of the conditions set forth in this consent order, including but not limited to report of a confirmed positive urine, or a prima facie showing of a relapse or recurrence of drug or alcohol abuse.

13. Respondent shall have the right to apply for removal of the automatic suspension on five (5) days notice but in such event shall be limited to a showing that the urine tested was not hers or was a false positive in the case of urine testing, or that other information submitted was false.

NEW JERSEY STATE BOARD OF DENTISTRY

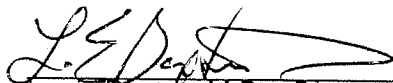
By: Herbert B. Dolinsky D.D.S.
Herbert B. Dolinsky, D.D.S.
Board President

I have read and I understand this
Consent Order and agree
to be bound by its terms. I consent
to the entry of this Order.

Marianne Mauro, D.M.D.
Marianne Mauro, D.M.D.

2-1-06
Date

I have read and understood the within Order and agree to comply with the terms which relate to the Professional Assistance Program



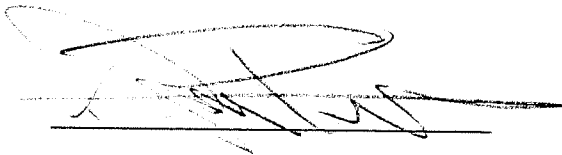
Louis Baxter, M.D., Director
Professional Assistance Program

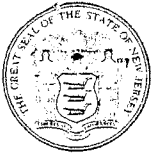
I have read and understood the within Order and agree to comply with the terms that relate to the reporting requirements as Dr. Mauro's treating psychiatrist.



George F. Wilson, M.D.

I have read and understood the within Order and agree to comply with the terms that relate to the reporting requirements as Dr. Mauro's Board approved monitor.





JON S. CORZINE
Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
State Board of Dentistry
124 Halsey Street, 6th Floor, Newark, NJ 07102



ZULIMA V. FARBER
Attorney General

KIMBERLY S. RICKETTS
Director

May 8, 2006

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P.O. Box 45005
Newark, NJ 07101
(973) 504-6405

Marianne Mauro, D.M.D.
11 Clayton Court
East Brunswick, New Jersey 08816

Dear Dr. Mauro:

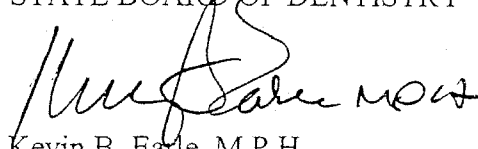
The State Board of Dentistry has had an opportunity to review to request for an increase in working hours beyond the hours enumerated in the Consent Order of Reinstatement filed on February 1, 2006.

In connection with that review, the Board has considered a communication from Louis Baxter, M.D., Executive Medical Director of the Professional Assistance Program of New Jersey, Inc., which was supportive of your request, as well as a communication from your employer, Eastern Dental.

Please be advised that the Board has authorized an increase in your working hours to 33 hours per week.

If you have any questions, please do not hesitate to contact me.

Very truly yours,
STATE BOARD OF DENTISTRY


Kevin B. Earle, M.P.H.
Executive Director

cc: Louis Baxter, M.D.
P.A.P.N.J.